FAX/Phone 941-334.9133

Form **8871** (July 2000)

Department of the Treasury

Political Organization Notice of Section 527 Status

OMB No. 1545-169

65-1027429

Intern	al Revenue Service				1 4/ :5-	7.35. / / 3.35.
Рa	Tt General Information					
1	Name of organization Name of organization Ondry Shiwell for Lee County Tay Applied From Malling address (P.O. Box or number, street, and room or suite number) Collector					
2	Malling address (P.O. Box or number,	street, and room or suite	e number) fve	COLLECTOI	2	
-	- Aller term end 71D godo	Wels, FL		<u> </u>		
3	E-mail address of organization	tilwell a d				
48	Name of custodian of records	4b C	ustodian's address			
	Sandra Stilwell	.,	Jam.	Cot.		
5a	Name of contact person	5b C	ontact person's addre			
	Sandra Stilwell			1. 		
6	Business address of organization (if d	ifferent from mailing add	ress shown above). N	umber, street, and	room or suite number	
	City or town, state, and ZIP code	<u>-</u> -			2. 1. 2. 1. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
рa	rt II Purpose					
7	Describe the purpose of the organizat	ion				
	Candidacy	tor elecr	eD . Of fr	ce.		
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Pa	rt III List of All Related Ent	ities (see instruction		·		
8a	Name of related entity	8b Relationship	8c Address			
	none			···········		,
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				OGDE	N, UT	
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_	The state of the s	<u> </u>			II. ARBONINE III.	

Part IV 🗒	List of All Officers, Di	<u>rectors, and Highly Co</u>	ompensated Employees (see instructions)
9a Name	•	9b Title	9c Address
	na a		
	none		
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	Under penalties of periury, I dec	clare that the organization named	in Part I is to be treated as an organization described in section 527 of the Interrecompanying schedules and statements, and to the best of my knowledge and believed.
	Revenue Code, and that I have	examined this notice, including ac	companying schedules and statements, and to the best of my knowledge and beli-
	/ h	10 K. Stilwell	$\frac{7}{2}$
Sian	1 dend	10 15 X Milwell	1 107100
	·	Michael / —	Date